



# **Corrective/Preventive Action Request**

*(C/PAR) Help the Environment - Help yourself - Help Others*

**Environmental Impact / Concern:**

**Date:**

(For additional information, use back or attach additional sheets)

**Area/ Location:**

\*For feedback on this request, please include the following:

**Name:** \_\_\_\_\_ **Section:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **or** **e-mail:** \_\_\_\_\_

**Print & return to:** Your Supervisor, or **Mail to:** EMR at MS 1103A, or **e-mail form to EMR**

**EMR Use Only:** C/PAR Opened: Yes ☐, Control # \_\_\_\_\_ No ☐

Resolution: